### **Application Data Sheet**

#### **Application Information**

Application Type:: Utility

Subject Matter:: Utility

CD\_ROM or CD-R?:: None

Title:: IMPROVED TASTING ENERGY BAR

Attorney Docket Number:: 02280.003720.

Total Drawing Sheets:: 0

Small Entity?:: No

**Applicant Information** 

Primary Citizenship Country:: USA

Status:: Full Capacity

Given Name:: EDWARD

Middle Name:: L.

Family Name:: RAPP

City of Residence:: BLAIRSTOWN

State or Province of Residence:: NJ

Country of Residence:: USA

Street of mailing address:: 282 Kerrs Corner Rd.

City of mailing address:: Blairstown

State or Province of mailing address:: NJ

Country of mailing address:: USA

Postal or Zip Code of mailing address:: 07825

Primary Citizenship Country:: USA

Status:: Full Capacity

Given Name:: JAMIE

Family Name:: TROY

City of Residence:: COLUMBIA

State or Province of Residence:: NJ

Country of Residence:: USA

Street of mailing address:: 86 Mount Vernon Road

City of mailing address:: Columbia

State or Province of mailing address:: NJ

Country of mailing address:: USA

Postal or Zip Code of mailing address:: 07832

Primary Citizenship Country:: USA

Status:: Full Capacity

Given Name:: JEANNETTE

Family Name:: DIDO

City of Residence:: HOBOKEN

State or Province of Residence:: NJ

Country of Residence:: USA

Street of mailing address:: 1132 Clinton Street

City of mailing address:: Hoboken

State or Province of mailing address:: NJ

Country of mailing address:: USA

Postal or Zip Code of mailing address:: 07030

Primary Citizenship Country:: USA

Status:: Full Capacity

Given Name:: DOUGLAS

Family Name:: MANN

City of Residence:: BELVIDERE

5.7 5.7 100100110011

State or Province of Residence:: NJ

Country of Residence:: USA

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Street of mailing address:: 1 Walnut Drive, Apt. 2

City of mailing address:: Belvidere

State or Province of mailing address:: NJ

Country of mailing address:: USA

Postal or Zip Code of mailing address:: 07823

Primary Citizenship Country:: USA

Status:: Full Capacity

Given Name:: THOMAS

Family Name:: COLLINS

City of Residence:: NAZARETH

State or Province of Residence:: PA

Country of Residence:: USA

Street of mailing address:: 104 North Liberty Street

City of mailing address:: Nazareth

State or Province of mailing address:: PA

Country of mailing address:: USA

Postal or Zip Code of mailing address:: 18064

Primary Citizenship Country:: USA

Status:: Full Capacity

Given Name:: KEVIN

Family Name:: RABINOVITCH

City of Residence:: HACKETTSTOWN

State or Province of Residence:: NJ

Country of Residence:: USA

Street of mailing address:: 11 Ajax Court

City of mailing address:: Hackettstown

State or Province of mailing address:: NJ

Country of mailing address:: USA

Postal or Zip Code of mailing address:: 07840

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Primary Citizenship Country:: USA

Status:: Full Capacity

Given Name:: RALPH

Family Name:: LEE

City of Residence:: HAMPTON

State or Province of Residence:: NJ

Country of Residence:: USA

Street of mailing address:: 6 Partridge Run

City of mailing address:: Hampton

State or Province of mailing address:: NJ

Country of mailing address:: USA

Postal or Zip Code of mailing address:: 08827

Primary Citizenship Country:: GREAT BRITAIN

Status:: Full Capacity

Given Name:: NEIL

Family Name:: WILLCOCKS

City of Residence:: FLANDERS

State or Province of Residence:: NJ

Country of Residence:: USA

Street of mailing address:: 7 Cathy Lane

City of mailing address:: Flanders

State or Province of mailing address:: NJ

Country of mailing address:: USA

Postal or Zip Code of mailing address:: 07836

Primary Citizenship Country:: USA

Status:: Full Capacity

Given Name:: ROBERT

Family Name:: BOUSHELL

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City of Residence::

**SPARTA** 

State or Province of Residence::

NJ

Country of Residence::

**USA** 

Street of mailing address::

10 Hayward Rd.

City of mailing address::

Sparta

State or Province of mailing address::

NJ

Country of mailing address::

**USA** 

Postal or Zip Code of mailing address::

07871

Primary Citizenship Country::

USA

Status::

Full Capacity

Given Name::

**RALPH** 

Family Name::

**JEROME** 

City of Residence::

**BLAIRSTOWN** 

State or Province of Residence::

NJ

Country of Residence::

USA

Street of mailing address::

143 Mohican Rd.

City of mailing address::

Blairstown

State or Province of mailing address::

NJ

Country of mailing address::

USA

Postal or Zip Code of mailing address::

07825

Primary Citizenship Country::

**USA** 

Status::

**Full Capacity** 

Given Name::

**TIAGO** 

Middle Name::

Ο.

Family Name::

RODRIGUES

City of Residence::

MARIETTA

State or Province of Residence::

PA

Country of Residence::

**USA** 

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Street of mailing address:: 53 Morning Circle

City of mailing address:: Marietta

State or Province of mailing address:: PA

Country of mailing address:: USA

Postal or Zip Code of mailing address:: 17547

Primary Citizenship Country:: USA

Status:: Full Capacity

Given Name:: JOHN

Middle Name:: M.

Family Name:: KAISER

City of Residence:: MANHEIM

State or Province of Residence:: PA

Country of Residence:: USA

Street of mailing address:: 1875 Kilmer Rd.

City of mailing address:: Manheim

State or Province of mailing address:: PA

Country of mailing address:: USA

Postal or Zip Code of mailing address:: 17545

Primary Citizenship Country:: USA

Status:: Full Capacity

Given Name:: IVONNE

Middle Name:: E.

Family Name:: NILL

City of Residence:: BOONTON

State or Province of Residence:: NJ

Country of Residence:: USA

Street of mailing address:: 132 Wilson Street

City of mailing address:: Boonton

State or Province of mailing address:: NJ

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Country of mailing address::

USA

Postal or Zip Code of mailing address::

07005

# **Correspondence Information**

Correspondence Customer Number::

5514

## **Representative Information**

Representative Customer Number::   U5514	Representative Customer Number::	05514	•
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### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An application claiming the benefit under 35 USC 119(e)	60/394,672	07/08/2002
This Application	An application claiming the benefit under 35 USC 119(e)	60/446,151	02/10/2003
This Application	Continuation-in-part of	10/271,710	10/15/2002
This Application	Continuation-in-part of	10/272,618	10/15/2002
This Application	Continuation-in-part of	10/272,571	10/15/2002

### **Assignee Information**

Assignee name::

Mars, Incorporated

Street of mailing address::

6885 Elm Street

City of mailing Address::

McLean

State or Province of mailing address::

Virginia

Country of mailing address::

USA

Postal or Zip Code of mailing address::

22101-3883

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